REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

TITLE OF INVENTION

Box No. III FURTHER APPLICANT(S) AND

APPLICANT

Box No. I

Box No. II

Name and address:

1400 West 94th Street P.O. Box 1299

United States of America

This person is applicant

for the purposes of:

Name and address:

SCHLEBES, Rolf Gerwersweg 13 46499 Hamminkeln

Germany

for the purposes of:

SPARK ARRESTOR

DONALDSON COMPANY, INC.

Minneapolis, Minnesota 55440-1299

State (that is, country) of nationality:

State (that is, country) of nationality: DE This person is applicant

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	International Application No.	•		
REQUEST	International Application No.			
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signed requests that the present	International Filing Date			
onal application be processed the Patent Cooperation Treaty.				
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	Applicant's or agent's file refer	rence		
TLE OF INVENTION	(if desired) (12 characters max	ximum) 758.1500WO01		
RESTOR				
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PPLICANT				
(Family name followed by given name: for a legal				
address must include postal code and name of cou indicated in this Box is the applicant's State (that i		This person is also inventor		
residence is indicated below.)		Telephone No.		
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	• 1 1	the States indicated in the Supplemental Box		
RTHER APPLICANT(S) AND/O	R (FURTHER) INVENTOI			
(Family name followed by given name; for a legal	entity, full official designation. The			
address must include postal code and name of cour indicated in this Box is the applicant's State (that is		This person is:		
residence is indicated below.)		applicant only		
ı		applicant and inventor		
		inventor only (If this check-box is		
		marked, do not fill in below.)		
of nationality:	State (that is, country) of residence:	<u>.</u>		
	DE			
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licants and/or (further) inventors are ind	icated on a continuation sheet.			
ENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE				
below is hereby/has been appointed to act on ore the competent International Authorities as		common representative		

the Further applicants and/or (further) inventors are i

Box No. IV AGENT OR COMMON REPRESI

The person identified below is hereby/has been appointed to act of the applicant(s) before the competent International Authorities Name and address:

indicate a special address to which correspondence should be sent.

Telephone No.

Teleprinter No.

(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

612/336-4711 Facsimile No. (612) 336-4751

BRUESS, Steven C. Merchant & Gould P.C. P.O. Box 2903

Minneapolis, Minnesota 55402-0903

United States of America

Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to

Form PCT/RO/101 (first sheet) (July 1998)

See Notes to the request form

Sheet	No		. 2
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Continuation of Box No. III FURTHER APPLICANTS AND/OR (FURTHER) INVENTORS				
If none of the following sub-boxes is used,	this sheet is not to be included in the request.			
Name and address (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) This person is: applicant only				
KIY, Andreas Friedenstrasse 11 45891 Gelsenkirchen	applicant and inventor			
Germany	inventor only (If this check-box is marked, do not fill in below.)			
State (i.e. country) of nationality: DE	State (i.e. country) of residence: DE			
This person is applicant for the purposes of: all designated all designated the United States	of America only the Supplemental Box			
Name and address (Family name followed by given name; for a legal entity, full of must include postal code and name of country. The country of is the applicant's State (that is, country) of residence if no Sta.	the address indicated in this Box This person is:			
	applicant only			
	applicant and inventor inventor only (If this check-box is			
State (i.e. country) of nationality:	marked, do not fill in below.) State (i.e. country) of residence:			
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This person is applicant all designated all designated State for the purposes of: States the United States of				
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State (i.e. country) of nationality:	State (i.e. country) of residence:			
This person is applicant all designated all designated State for the purposes of: States all designated the United States of				
Name and address (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) This person is: applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.)				
State (i.e. country) of nationality:	State (i.e. country) of residence:			
This person is applicant all designated all designated States except the United States of America only the States indicated in the States indicated in the States of America only the Supplemental Box				
Further applicants and/or (further) inventors are indicated on another continuation sheet.				

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Box No. V DESIGNATION OF STATES

The following designations are hereby made under Rule 4.9(a) (mark the applicable check-boxes; at least one must be marked):

Regional Patent

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- OA OAPI Patent: BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, GQ Equatorial Guinea, GW Guinea-Bissau, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (if other kind of protection or treatment desired, specify on dotted line)

Nation	National Patent (if other kind of protection or treatment desired, specify on dotted line):					
\boxtimes	AE	United Arab Emirates	\boxtimes	LC	Saint Lucia	
\boxtimes	AG	Antigua and Barbuda	\boxtimes	LK	Sri Lanka	
\boxtimes	AL	Albania	\boxtimes	LR	Liberia	
\boxtimes	AM	Armenia	\boxtimes	LS	Lesotho	
\boxtimes	AT	Austria and utility model	\boxtimes	LT	Lithuania	
\boxtimes	ΑU	Australia	\boxtimes	LU	Luxembourg	
\boxtimes	ΑZ	Azerbaijan	\boxtimes	LV	Latvia	
\boxtimes	BA	Bosnia and Herzegovina	\boxtimes	MA	Morocco	
\boxtimes	BB	Barbados	\boxtimes	MD	Republic of Moldova	
\boxtimes	BG	Bulgaria	\boxtimes	MG	Madagascar	
\boxtimes	BR	Brazil		MK	The former Yugoslav Republic of Macedonia	
\boxtimes	BY	Belarus	\boxtimes	MN	Mongolia	
\boxtimes	BZ	Belize	\boxtimes	MW	Malawi	
\boxtimes	CA	Canada	\boxtimes	MX	Mexico	
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\boxtimes	CR	Costa Rica	\boxtimes	OM	Oman	
\boxtimes	CS	Serbia and Montenegro	\boxtimes	PG	Papua New Guinea	
\boxtimes	CU	Cuba	\boxtimes	PH	Philippines	
\boxtimes	CZ	Czech Republic and utility model	\boxtimes	PL	Poland	
\boxtimes	DE	Germany and utility model	\boxtimes	PT	Portugal	
\boxtimes	DK	Denmark and utility model	\boxtimes	RO	Romania	
\boxtimes	DM	Dominica	\boxtimes	RU	Russian Federation	
\boxtimes	DZ	Algeria	\boxtimes	SC	Seychelles	
\boxtimes	EC	Ecuador	\boxtimes	SD	Sudan	
\boxtimes	EE	Estonia and utility model	\boxtimes	SE	Sweden	
\boxtimes	EG	Egypt	\boxtimes	SG	Singapore	
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\boxtimes	GE	Georgia	\boxtimes	TZ	Tanzania	
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\boxtimes	HR	Croatia	\boxtimes	TR	Turkey	
\boxtimes	HU	Hungary	\boxtimes	TT	Trinidad and Tobago	
\boxtimes	IN	India	\boxtimes	UA	Ukraine	
\boxtimes	ID	Indonesia	\boxtimes	UG	Uganda	
\boxtimes	IL	Israel	\boxtimes	US	United States of America	
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\boxtimes	JP	Japan	\boxtimes	VC	Saint Vincent and the Grenadines	
	KE	Kenya	\boxtimes	VN	Viet Nam	
\boxtimes	KG	Kyrgyzstan	Ø	ZM	Zambia	
\boxtimes	KP	Democratic People's Republic of Korea	\boxtimes	ZA	South Africa	
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		Sheet No	4		
Box No. VI PRIORITY CLAIM		Further priority claims are indicated in the Supplemental Box.			
Filing date			Where earlier application is:		
of earlier application (day/month/year)	Number of earlier application	national application: country	regional application:* regional Office	international application: receiving Office	
item (1) 08 October 2002 (08.10.2002)	20215433.5	DE	1		
item (2)					
item (3)					
of the earlier applica purposes of the press • Where the earlier application is	The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of the present international application is the receiving Office) identified above as item(s): * Where the earlier application is an ARIPO application, it is mandatory to indicate in the Supplemental Box at least one country party to the Paris Convention for the Protection of Industrial Property for which the earlier application was filed (Rule 4.10(b)(ii)). See Supplemental Box.				
Box No. VII INTERNA	ATIONAL SEARCHING AU	THORITY			
Choice of International Searching Authority (ISA) (If two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used): ISA / EP Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority): Country (or regional Office):					
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This international application contains the following number of sheets: request : 4					
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